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Feb 26, 1999 8:00 am
Secretary of State

02-26-1999 90035 022 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 301612

1. Corporation Name

AAA AUTO LEASING INC

Principal Place of Business

**1995 N.E. 142ND STREET
NORTH MIAMI FL 33181-1505**

Mailing Address

**ONE RIVERWAY
STE 500
HOUSTON TX 77056
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1966

4. FEI Number

59-1158211

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALL. FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DVPC** ☐ DELETE
NAME **CERNY, DOUGLAS M**
STREET ADDRESS **ONE RIVERWAY, STE 500**
CITY-ST-ZIP **HOUSTON TX 77056-1903**

TITLE **DCEO** ☐ DELETE
NAME **KRISTINIK, RICHARD H**
STREET ADDRESS **ONE RIVERWAY, STE 500**
CITY-ST-ZIP **HOUSTON TX 77056-1903**

TITLE **P** ☐ DELETE
NAME **ZILBER, MARTIN**
STREET ADDRESS **1995 NE 142 ST**
CITY-ST-ZIP **N MIAMI FL 33181**

TITLE **D** ☐ DELETE
NAME **MERCADANTE, JOHN J**
STREET ADDRESS **ONE RIVERWAY, STE 500**
CITY-ST-ZIP **HOUSTON TX 77056-1903**

TITLE **CFO** ☐ DELETE
NAME **KING, LAWRENCE**
STREET ADDRESS **ONE RIVERWAY, STE 500**
CITY-ST-ZIP **HOUSTON TX 77056**

TITLE **ACS** ☐ DELETE
NAME **THOMAS, STEPHANIE**
STREET ADDRESS **ONE RIVERWAY, STE 500**
CITY-ST-ZIP **HOUSTON TX 77056-1903**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

See Attached Sheet

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephanie A. Thomas **Stephanie A. Thomas** 1/28/99 713/266-0104
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)